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RESEARCH

Maneiras de pesquisar o cuidado de enfermagem por meio do método cartográfico

Ways of researching the nursing care through the cartographical method mapping

Formas de buscar lo cuidado de enfermería a través del método cartográfico

Mônica de Almeida Carreiro ¹, Margarida Maria Donato dos Santos ², Pollyana da Rosa Gama ³, Nebia Maria Almeida de Figueiredo ⁴

ABSTRACT

Objective: To implement a teaching strategy of the nursing care that includes the sensitive dimension; to analyze the results from the information of students in relation to the strategy. **Method:** The research is qualitative and made use of field daily of academic students about the follow-up of the planting of beans. **Results:** The teaching-learning strategy has awakened love, fondness and affection in 99% of the surveyed students. **Conclusion:** It has allowed us to realize that the observation is a fundamental component to promote care; that the exchange of experiences and the pursuit of knowledge might ease and make the nursing practice more enjoyable and stimulating. **Descriptors:** Teaching, Learning, Strategies, Nursing.

RESUMO

Objetivos: Implantar uma estratégia no ensino do cuidar em enfermagem que inclua a dimensão sensível; analisar os resultados a partir da informação dos estudantes sobre a estratégia. **Método:** A pesquisa é qualitativa e utilizou o diário de campo dos acadêmicos sobre o acompanhamento do plantio do feijão. **Resultados:** A estratégia de ensino-aprendizagem despertou o amor, o carinho e o afeto em 99% dos estudantes. **Conclusão:** Permitiu perceber que a observação é peça fundamental para se promover o cuidado; que a troca de experiências e a busca de conhecimentos facilitam e tornam a prática mais proveitosa e estimulante. **Descritores:** Ensino, Aprendizagem, Estratégias, Enfermagem.

RESUMEN

Objetivos: Implementar una estrategia relativa a la enseñanza de los cuidados de enfermería que incluya la dimensión sensible; analizar los resultados a partir de la información de los estudiantes acerca de la estrategia. **Método:** La investigación es cualitativa y utilizó el diario de campo de los académicos sobre el seguimiento de la plantación de frijoles. **Resultados:** La estrategia de enseñanza-aprendizaje despertó el amor, el cariño y el afecto en el 99% de los estudiantes. **Conclusiones:** Ha permitido también la comprensión de que la observación es una pieza clave para promover el cuidado; que el intercambio de experiencias y la búsqueda de conocimientos facilitan y hacen la práctica más provechosa y estimulante. **Descriptor:** Enseñanza, Aprendizaje, Estrategias, Enfermería.

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INTRODUCTION

The object of this study is the inclusion of sensitive strategies in the teaching of the nursing care. Therefore, we seek to answer the guiding question: what are the strategies used in the teaching of care that go beyond rationality and include the sensitive plan?

The nursing teachers make use of peculiar teaching strategies to explain their contents, whereas the know-how of nursing does not only use the objective, but the subjectivity, intuition, reason, thought, feelings, emotions and solidarity of those who care and those who are cared.¹ Based on the National Curriculum Guidelines for graduation nursing courses, from 2001, the courses gave rise to a discussion process for the construction of a pedagogical project that could meet the mission of training and empowering people to become critical, creative and political nursing professionals, in a humanistic perspective, which emphasizes the quality of life, the social rights and citizenship for the teaching of this profession.

This context requires from training institutions the implementation of pedagogical actions of changes by seeking to reorient the formation process targeted to skills and abilities to develop the nursing practice,² the know-how, which will meet the new challenges imposed by the health policy and by the society at large. The disciplines that address fundamentals of care are implementing teaching strategies not only rational for the teaching, but to give it peculiarities to explain its contents, sometimes difficult because of the limited practice of procedures, even when we conceptualize about care and its context.

We believe that the educational experience about the care proposed by the training institution and by the teachers who teach influences the way of care of the student. The challenge of producing knowledge represents not only that one that is learned in the academy, but also the relationship with the experience, since one learns through the other one, when producing relationships with it, and the circumstances allow the teaching of care. Accordingly, the search for new teaching strategies as a way of associating the academic world and the professional everyday world requires from the researcher the act of performing the integration of the technical education associated to the critical and reflective reading about the everyday of those who teach and of those who learn, how one should teach and how one should take care.³ Thus, it involves the reading of the reality and the existing knowledge about such reality, i.e., the reality experienced by the learner in the process of educating and learning by learning.

The problem identified in this study is “flexibilizing” the process of teaching to care and was aimed at implementing a teaching strategy of care that includes the sensitive dimension and analyzing the results from the information of students about the strategy. It is necessary to know and experience feelings that only become possible from the moment in which one makes questions about the meaning of care and its relationship with the life and the profession of nursing. With this perspective of redefining educational strategies for the teaching of nursing, it is possible to contribute to the construction of a personal internalization of concepts, values and actions inherent to the professional training and the profession of nursing, which enable the psychic maturation of the student and the involvement with the professional training itself in order to acquire awareness of the value of care.

The pedagogical project of nursing courses, guided by the curriculum guidelines, must place the student as a subject of learning, with the teacher as facilitator and mediator of the teaching-learning process. To change the focus of training of the nurse is the challenge to implement a proposal suitable to the teaching institutions, which are mostly focused on pragmatism, which affirms the application of scientific knowledge as the only answer to the problems of the human being. The curriculum guidelines allow establishing standards for the training that consider the comprehension of the nature of customers (also teachers and students) and characteristics of the mankind. Thus, it means comprehending the customer, the student, as a being formed by its experiences, with its ways of feeling and comprehending its physical, mental and spiritual body, as well as the world around it.¹

Studies have demonstrated that the teaching model that prevails in nursing training still shows up reductionist, with fractionated and simplified contents, with the predominance of pedagogical practices of a traditional teaching method, rigid, mechanical, which does not provide opportunity to the student to acquire conditions to establish a relationship with the environment in which it is inserted, thereby preventing the development of critical and analytical sense.²

Nursing, as a practical discipline of a sensitive and work-related science, requires a special training and production of knowledge that underpin the professional action, i.e., knowledge that do not end in the classroom, but that must be considered as the starting point for a reflection that leads to comprehension of the practice. Accordingly, knowledge is not a finished issue, but a construction that makes and remakes itself in a dynamic manner.

The nursing care seeks to develop attitudes and spaces of actual intersubjective meeting, which involves the interaction of the nurse/nursing student with the customer, thereby requiring self-knowledge and a type of knowledge that encompasses the sensitivity in touching, in looking, in knowing to feel and the seize the emotions of those who we are serving for caring, and this care is supported by technology, but not being limited to it. The natural care model does not require a cutting-edge technology, but needs the understanding that the care overcomes the physical actions, because humans have complex individualities in the dimension of life, in other words, their meanings and values that the biomedical paradigm fails to meet. Consequently, to serve them, it is necessary to produce knowledge.⁴

The body is present in any act of care by offering or receiving care shares. The body is the object creator of techniques and technologies as a space of health care, such as the

body of chemistry (biology of life) and the body of feelings (biology of feeling the life)⁴ and thereby makes us think that there are techniques and technologies for it. Technique is defined as a set of processes of an art, manner or special ability to execute or do something specific to a particular profession. Thus, nursing is more than technique, since it is a creative process that involves sensitivity, technology, which is understood as the process of exercising the technique that involves apparatus and/or methods with the scientific knowledge of the “reason” of the technology and because it makes use of the scientific principles of bio-physio-anatomy; of socio-psycho-anthropology; use of apparatus and machines of several complexities that assist in the diagnosis and restoration of the installed situation.⁴

The autonomous work of nursing makes use of the body, referring to the sensory surfaces to observe, assess and feel the sensations and emotions that highlight situations of welfare or malaise in the customer. This ability of the nursing professional denotes an esthetic perspective of care, because the tools used by it are in the scope of subjectivity. Under that perspective, the nursing work means developing an art in which the artist meets its sense of solidarity, of love, of detachment of its own self, in favor of the other, a human being equal to it.⁴⁻⁵ Esthetics¹ refers to everything that lies between the material and the immaterial: between things and thoughts, sensations and ideas. It is the transmission mechanism by which the theory is converted into spontaneous social practice.

The esthetic dimension of care is seen as a sense of being, which is expressed in an attitudinal way, because it is relational and requires the awareness of what it means to each one individually.⁴ It is an art form in connection with the metaphysics, in connection with the human psyche or with sensations and sensitivity. It is necessary to know and experience feelings that are possible from the moment in which one questions itself about the meaning of care and its relationship with the life and the profession of nursing.

Verbs that describe actions such as establishing, defining, applying, guiding, developing and promoting are part of the text of the Nursing Curriculum Guidelines, with the aim at encouraging nursing students to conduct such actions, thereby turning students into capable nurses in all senses required for this profession.⁴ Thus, the act of teaching nursing guided by the Curriculum Guidelines goes through the urgency of punctuating the course of the scientific and technological construction in pedagogical actions, aimed at optimizing the professional profile that one wants to seek.

Accordingly, the educator needs to understand the dimensions of teaching/learning/doing/searching in nursing by considering the sphere of the unreal, of subjectivity, since it is developed through intuition, reason, thoughts, feelings, emotion and solidarity. Therefore, one should aim at adapting its knowledge to the new didactical and pedagogical propositions, as well as respecting the student according to its way of learning, with its experiences, i.e., its ways of perceiving and understanding.¹

Currently, there is no space for performing a merely expository teaching, but for conducting a dialogue between teachers and students, that is to say, an alliance resulting from cultures, values and experiences of learners and teachers. Accordingly, knowing the care or the things encompassed by it, in its fullness, includes experience it, considering care as an interactive process that goes beyond a merely technical action, thereby creating possibilities, connections and leading to concerns, elements present in situations that involve

the giving and receiving help, which generates conditions of trust, where the one who receives the offered care feels cared, and this is the essence of the nursing.²

Doctor Alcione Leite da Silva⁶, professor at the Federal University of Santa Catarina, when reflecting on the nursing care process, made use of a metaphorical parlance. In her work, she has compared the nursing care process with the care of a huge garden with green and exuberant plants of all species, with many flowers. In her experience/trajectory, to learn the art of care, this scholar concluded that it is necessary to participate, i.e., take care of the garden, feel the energies of love that radiated from those plants, the living and dynamic forces of the elements (earth, water, fire and air) present in the nature. Such statement denotes in realizing that all living and non-living things emanate energy fields and that thinking and feeling imply movement of living forces, in acting, issuing and capturing energy. From this analogy, one can understand that each new experience leads us to search for a greater “complexification” and awareness of the true being and the ability to care is only acquired by caring and finding new ways of care. Thus, it is possible to learn the essence of a good care.⁶

The metaphor produced by professor Alcione made us reflect on the quest for a sensitive teaching-learning methodology that could be applied to the teaching-learning of the nursing care, thereby awakening and developing the student to perform care-related behaviors in a space of planting and cultivation of a plant.

The nursing training has been characterized by an early insertion of the academic student in the dynamics of care, which abolishes the seizure of conflicting aspects of this reality, thereby leading the learner to invest and coexist with cognitive unpreparedness and affective immaturity. With participatory and creative strategies and art, one can create possibilities, connections, which leads to concerns, elements present in situations that involve the giving and receiving help, thereby creating conditions of trust, where the one who receives the offered care feels cared, and this the essence of the nursing.

METHOD

This is a research with qualitative nature that used the tracking method of cartography, a research of intervention and production of subjectivities, a method targeted to perform an experimentation anchored in the actual.⁷ With the prospect of redefining educational strategies, the aim was to achieve a personalized construction of internalization of concepts, values and actions inherent to the vocational training, which could encourage students to develop concepts that enable their psychic maturation and the involvement with the training itself. Thus, objective and subjective conditions that allowed the emergence of care as a fundamental attitude in relationships with others were provided.

The use of the cartographical method (mapping) proved to be efficient to develop complex contents in which we sought to analyze the experience of care in different angles,

by reflecting on the decision-makings of students, the basic tools for the care process, besides the role and profile of the nursing professional, thereby awakening the student's interest for the care. This methodology also allowed the student to share its experiences on the follow-up of the process of planting and taking care of a plant with the group, and these shares were often developed in a creative way, which enabled the awakening of a sensibility from construction of its care actions - and also of their colleagues' actions - from the collectivization.

The thought of using the planting of a seed as didactical activity came from the observation that students come to the nursing course with the common knowledge about the profession and the nurse being, which raises the necessity of providing them the development of new concepts, attitudes and behaviors consistent with the professional profile and the guidelines of the profession in a creative and participatory way. The chosen plant was the beanstalk (*Phaseolus vulgaris*), for being a seed with good germination power, easy to cultivate, which completes its life cycle in about 60 days and that allows the planting in small places, such as, for example, plant pots.

The cartographical method presents clues to guide the researcher in its study from the follow up of processes. The clue 1 is about the *inseparability between the knowledge and the transformation, both of the reality and of the researcher*. The application of this clue to the study refers to the theoretical benchmark that permeates the entire process of planting the beanstalk and the follow-up of plant growth, which favors the association of the theory to the practice, the reflection and the use of experiences in metaphor with the nursing.

In the clue 2, four gestures of cartographical attention are defined: *tracking*, *touch*, *landing* and *attentive recognition*. The *tracking* is a gesture of open and unfocused attention adopted by the researcher, targeted to movements of exploration and knowledge of the object from a good syntonization with the problem, an attitude by the problem and on the problem. The *tracking* was applied in different ways for students to perform the activity of planting bean seed. The *touch* is related to this gesture, such as the use of different senses, that is to say, their perception to construct the object from the selection of elements that can affect the object, something that acquires relevance, which should be noted, a heterogeneous element. It is the sign that there is an ongoing process that requires a concentrated attention, thereby emphasizing that there are multiple trajectories to achieve a particular purpose. In our study, the *touch* took place from the follow-up of plant cultivation process and the identification of different ways of developing care and promoting the evolutionary development of the plant.

The gesture of *landing* indicates a change of the attention window of the researcher, where the field is closed to create a new territory for that the seizure occurs. The attention is moved from the micro, focal activity (gem window) passing from the perceptive field (page window), with the onset of the dispersion of the attention, to the divided attention (room window), by assimilating a multiplicity of parts, thence to the detection of elements (courtyard window) and to the connection of these elements from the micro to the macro (landscape window). The research used the *landing* for the analysis and comparison of the results of the beans cultivation with the nursing care.

The gesture of *attentive recognition* took place by means of the production of knowledge from a trajectory of research that involved the attention and the creation of territories of observation.

As for the clue 3, mapping is to follow-up the processes, it is understood that the processuality is present at all times of research, since we are always at work, in process, in its advancements, in its interruptions, in fields, in letters and lines, in the writing and in us. In this study, the clue 3 is identified by use of the field diary of students about the follow-up of the planting of beans, as a way of registration. Regular reports after care activities were made, thereby gathering information, both objective and from impressions that emerge from the experience. In cartographical research, field journal is understood as “a precious practice for the production of data of a research and have the function of turning phrases and observations captured in the field experience into knowledge and ways of doing”.^{6:70}

The field work requires the housing of a territory that the researcher did not inhabit before, and its behavior might range from a participant observation to observant participation, which will depend on the characteristics of the territory. In order to be able to follow-up processes, the cartographer needs “*to be available for the exposure to the newness, whether it is distant or in the neighborhood. This is an attitude that is developed in the field work*”^{6:56}, i.e., the development of an affective receptivity.

Whereas the cartographical method allows the production of knowledge through the engagement of those who know the world to be known, through the share of an existential territory in which subject and object of research develop relationships and co-determinations, the clue 7, *mapping is to inhabit an existential territory*, introduces the concept of existential territory favoring the senses and forms of expression. In cartography, territory is understood as *a set of procedures that might be described and explained*,^{7:132} a pre-existing certain reality. Thus, in this study, the student inhabits a territory, planting of a plant, which requires from it a new learning in relation to the senses and forms of expression that involve different aspects of environment, technique, plant characteristic, general and specific care procedures of the chosen plant, thereby generating a knowledge of the practice.

The Bean Planting methodology was applied to 200 students from two private schools of nursing, belonging to institutions of Higher Education in Rio de Janeiro and in Minas Gerais, in the period from 2007 to 2009. The disciplines that served as the background for the development of the methodology are belonging to the semi-integrated curriculum developed in those institutions, where there is the first contact of the student with the specific contents of nursing. The planting methodology was the basis for the development of the entire programmatic content of the discipline, which lasts for one semester.

This paper comes from a class activity and, for this reason, was not sent to the Ethics Research Committee.

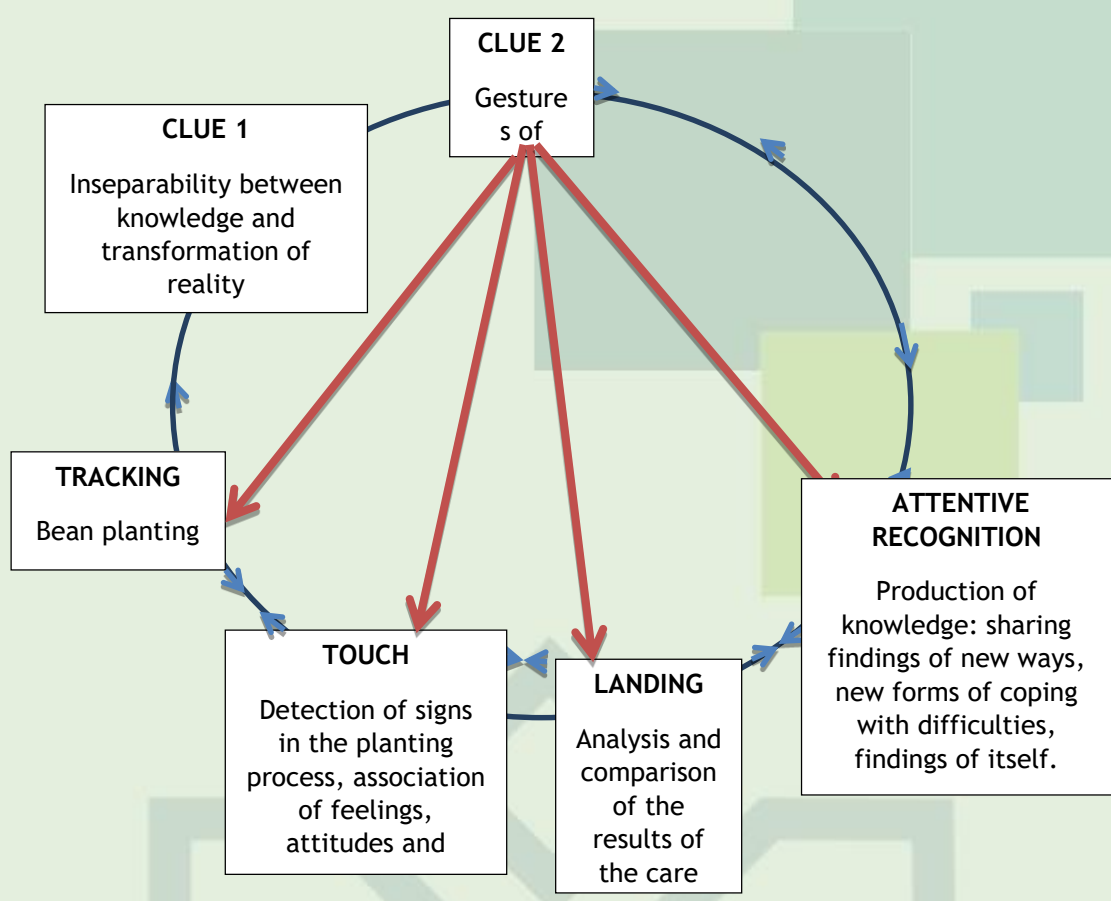


Figure 1 - Moment of the cartographical method in the study “Ways of researching the nursing care by means of the cartographical method”.

RESULTS AND DISCUSSION

On the first day of class of the discipline, whereas that all students and teachers are unknown, a dynamics of presentation called TRIBO INDÍGENA (INDIGENOUS TRIBE)⁸ was developed, which had the purpose of making the group members known from a major aspect of their personality, reflecting on the choice process and analyzing the feelings involved in it. At the end of the presentations, and continuing the story of the indigenous tribe, we offered to learners a disposable cup for coffee, a piece of cotton wool and three bean seeds. Subsequently, they were oriented to plant the seeds and care of them until the date of the first assessment of the discipline (approximately 60 days).

The learners must develop a field diary containing information about the care process and evolution of the plant, and it is concluded with definitions of the role and profile of the caregiver and concept of care in accordance with its experience of care. Thus, at the end of the class, the students have their first challenge: to take the bean seeds to home in a safe manner. We asked them to return to classroom in the next week bringing the beans planted. This is the second challenge. The perspective of the teachers is to initially awaken attitudes of care in the sense of interest and dedication in the student.

In the second meeting with the students, there is a great curiosity of all - students and teachers - to show/monitor the development of the beanstalk and of each student, by observing the care of others compared to your (*touch*). On that day, due to the fact that every bean seeds were planted on the same day, taken from the same batch, but subjected to processes of care in different manners and also because they were side by side in the classroom, the study objects allowed students to start comparing the development of grain and analyzing some facts such as: why the colleague's bean is more exuberant than mine? Why the three seeds are germinating at different times? Why my colleague has replanted the beans on earth? Why my beans have not yet germinated? Why it has mold? How do you care? These and other questions of the students are exemplified in some speeches: *I established a routine of procedures: to verify water, brightness and temperature. [...] I was singing when I started the routine procedures; it seems that they like me and make me happy too (a21). I have learned that this experience of care means that you are providing care. Above all, taking care is an act of life in the sense of representing a variety of activities aimed at maintaining, sustaining life and allowing it to reproduce itself [...] (a2) [...] this experience [...] made me get a responsibility in relation to care shares, whether with a simple seed or with a human being [...] (a31)*

The students have identified the experienced feelings, including feelings of loss, and other characteristics that caregivers must develop. 92% demonstrated fondness, affection, responsibility and attention (*touch*). These attitudes are demonstrated in the speeches: *[...] fear, happiness, responsibility, fondness, stress, reflection, nervousness, anxiety, sadness, helpful and zealous (a40) [...] taking care of a plant is as complex as caring of a human being. It requires dedication, patience, observation and commitment [...] the caregiver also needs sensitivity to conduct the care in the best possible way [...] (a15).*

Commonly, one can heard reports of "accidents" with seeds, such as loss of a bean seed within the means of transportation to the college; the mother who threw out the little cup with the plant, because it had a strong odor; criticism on the part of close people to be in college and perform a activity common to the kindergarten phase; presence of pests or falls. 51% of the surveyed students have reported some type of accident with the plant.

The answers to these and other questionings are mostly given by the students themselves (*attentive recognition*) from the conduction of the reasoning by the teacher, as shown in the following reports: *Despite being something that seems simple in the eyes of many people, it has required me a continuous concern and exclusivity of time every day. (a4). Unexpected circumstances happened, which made me realize that attention is extremely important. (a5). This experience was very difficult, since we have to learn to deal with something that does not depend on us, our fears [...] (a21). This experience taught me that we must have a permanent care in relation to those who depend on us, when we fail in these terms, we harm the other. For delegating a function, you need to let your goal very clear, people do not always make their obligations as we do, but one needs to delegate [...] (a3).*

Sometimes, it is necessary to show the greatness of that simple task, taking good care of the plant, which has the power to awaken love and care in each learner. One needs to control external conditions and their influences, since they could affect the life and

development of those fragile little plants. Accordingly, those who follow the steps of care (92%) realize that it is necessary to observe your object of care to perform care shares, thereby understanding that the demand for care starts from it and not from the caregiver.

It raises the necessity of transferring the cotton plant to the earth, of providing nutrients for its development, the importance of fertilizing the earth, of realizing the right time and the right amount of water, ventilation and light required for each one of them. It will highlight the life cycle and the necessity of being attentive to insects and to weeds, mediated by observation, which is the basic instrument of care. 85% of the surveyed plants reached the stage of stem and foliage, 4% reached the stage of fruit (pod) and 4% of the seeds died without germinating. One needs to control external conditions and their influences, since they could affect the life and development of those fragile little plants and correlate it with the act of human care. *The big mistake that I made in this experience of care was getting scared of risking, I was afraid of putting the bean in the earth [...] (a10). I noticed that leaves open easier when they are near the sunlight. I talked to my beanstalk...and took a photo with it [...] (a40). The patient showed a small reaction [...] (a16).*

In this last student's quotation, one should highlight the influence of the biomedical in the previous training of students, which is reflected in the experimental activity, moment in which they can realize that nurses take care of the person to maintain health in the bio-psycho-emotional dimension. Nonetheless, care actions must be directed to healthy or sick people.

For every class in which that dynamics is applied, new skills are produced in different manners. The application of this teaching strategy to several classes allowed us to realize that the students reach similar conclusions from different processes of reasoning, but all positive with regard to the initial proposal. *[...] I could conclude that the care provided to a person is very important, not only when it is sick, but for its development (a27). Care for me is a so beautiful word and makes me feel good to know that I can take care of someone (the little plant), I feel capable and I am doing what I like (a40). I loved to plant and care of the beanstalk, since I understood more about the profession that I want to exercise and discovered that not everything runs in the way that we want; so, good and bad things happen. (a40)*

By assessing the knowledge acquired by the academic students at the end of the discipline, we realize that, in a natural way, without a pure memorization of concepts of care, but associated with practical experience and awareness, the students speak of the science and art of care in a natural form, with trust in their speeches and with sureness.

At the end of this experience, I realized the value and meaning of the word care, because no matter what or who you care for, but the resources used to take care [...] we have to see the necessities that the other shows, we have to involve our hearts on it, not only the body and mind. (a10)

If you fail to take care, to look or even to talk to the subject, it might affect the development or recovery of it. (a27)

After delivering the work, many students keep the care actions towards the beanstalk until the final stage of its development and lead the vegetable, pod or pod's bean to present in the classroom. There are also those who, at the end of the presentation of the work, leave

the bean plant in the classroom or throw it in the garbage, as exemplified by the following statement: *firstly, I thought that was strange - what could a little bean seed have to do with nursing? (a10).*

Thus, we realize that, for these students, taking care of the plant did not represent more than one task of the discipline to acquire grades (7%). On the other hand, some learners reported that really liked the beanstalks and were happy with their development or sad by noticing the presence of fungi or when ants ate the plants' leaves or, moreover, when the plant growth was not as expected nor consistent with the provided care, as in the speeches: *I got surprised and happy to see that those seeds [...] produced a small sprout [...] (a1) A leaf got wilted and I got very sad and disappointed. What have I done wrong? (a40).* These situations induced the student to produce thoughts and analyzes. Some sought scientific knowledge, substantiation and models of care, while others empirically guided their care shares. *For starting the planting and monitoring all stages of development of the plant, I went out in search of knowledge through researches (a15).*

Some of them have understood that they must plan their care shares from the necessity presented by the other or by the previous knowledge of the common necessities and not only from their values and knowledge, while others do not achieve this conclusion. [...] *I started thinking about what would be the best for my beanstalk [...] (a40). Taking care is more than providing what is necessary, as in the case of the beanstalk. It was not enough just to put water or leave it under the sun, you also need to demonstrate love and fondness; you need to know understanding what happens, why it happens, if the things made have improved or worsened the situation, the reactions; it means knowing understanding through the gaze and donate itself by the welfare of the other (a1).*

It is worth highlighting that the care only happens as a direct action in the permanence or presence of the caregiver and that emerges from some characteristics and behaviors of the caregiver, such as wanting to care, demonstrated from the caregiver's involvement, creating an environment that can offer the customer what it needs and likes, which individualizes the action, and being emotionally well to be able to convey positive mental-body energy. Therefore, being able to critically think about the provided care and assess if their care shares were therapeutic.

The care is related to the things that have meaning for people. With the teaching strategy "planting of beans" to conduct the caring-teaching-researching process, in the quest for unifying the reality of care and teaching, there is an approximation on the part of whom who teaches, whom who takes care and of what is taught. Thus, the research, in the reality of care and teaching, starts to be seen as a constituent element of the work, i.e., the practice of the academic student/teacher/nursing professional. It also allows making the learning most fruitful and stimulating for teachers and students, which awakes love, affection and respect, thereby paving the way for the conduction of other studies and leading to the creation of new teaching strategies on the art of care.³

The motivation⁶, regarded as the willingness to be cared, to help, and that collaborates in the desire to grow and will to live, is closely related to the knowledge of the previous experiences of being cared, which might help or hinder the care actions, and its knowledge might soothe states of anxiety, fear and anguish, if they have been negative. The

motivation includes the desire to care, the values, the commitment and ethics of the caregiver. The caregiver must be enabled to help, support and seek efforts for restoring the physical order, by considering the uniqueness of the other. The ability to care requires self-knowledge from the caregiver, since, from it, one can show what one wants to be, and favors to know the other being. Furthermore, for taking care, it is necessary to develop responsibility, compassion, love, respect, attitudes of tolerance, solidarity - the energy for conducting care shares -, moral obligation and fairness.

The critical thought is also stimulated by the strategy “planting of beans”, from the capacity of questioning, examination, issuance of hypotheses, reflections and implementation of alternatives, besides facilitating the creativity to the nursing care process. There might be barriers to the development of the nursing care process. These are related to the lack of power, the identity-related conflict and the devaluation of the care assigned to the nursing.⁸The barriers might be controlled or destroyed as the nursing clarifies its role, thereby defining its focus and valuing the care actions.

CONCLUSION

Through this study, we can conclude that a strategy of sensitive teaching awakens sensitivity, knowledge and development in students. Accordingly, it is possible to exercise the art of care towards attitudes and behaviors aimed at providing the customer's welfare. By considering the contact with itself, the findings of itself, of its subjectivity, and its emotional competence, the student becomes able to listen and welcome the others. Thus, it develops its knowledge, but not only by absorbing the ready knowledge of books that was elaborated by other people.

The teaching strategy has provided the awakening of love, fondness and affection in 99% of the surveyed group. From it, one can learn that the observation is a fundamental component to promote a good nursing care; that the exchange of experiences and the pursuit of knowledge might ease and make the nursing practice more enjoyable and stimulating; that accidents can happen even when one is providing a good care and that, when a function is delegated, one must clarify the procedures and their objectives.

This paper disseminates and opens the way for the accomplishment of other studies about the nursing teaching, thereby favoring a deeper knowledge about the art of teaching to care. To reflect the professional nursing training in the face of the new century's changes is a requirement that is imposed on educators in general and one should not ignore the necessity for adjustments to form the new worker who will be required by the labor market; however, without forgetting the ideological assumptions of this profession. Hence, the nursing teacher should not only transmit the knowledge, but also have concern about encouraging

the production of knowledge, thereby becoming organizer and stimulator of the development of knowledge.

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